

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:		OIL WELL ☐	GAS WELL ☒	DRY ☐	Other _____		
b. TYPE OF COMPLETION:		NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other _____
2. NAME OF OPERATOR Supron Energy Corporation						5. LEASE DESIGNATION AND SERIAL NO. SF 078511	
3. ADDRESS OF OPERATOR P.O. Box 808, Farmington, New Mexico 87401						6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 1070 Ft./South; 980 Ft./East line At top prod. interval reported below Same as above At total depth Same as above						7. UNIT AGREEMENT NAME	
14. PERMIT NO.						12. COUNTY OR PARISH San Juan	
DATE ISSUED						13. STATE New Mexico	
15. DATE SPUDDED 10/3/80		16. DATE T.D. REACHED 10/11/80		17. DATE COMPL. (Ready to prod.) 1/6/81		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6590 R.K.B.	
19. ELEV. CASINGHEAD 6579		20. TOTAL DEPTH, MD & TVD 3650 MD & TVD		21. PLUG, BACK T.D., MD & TVD 3615 MD & TVD		22. IF MULTIPLE COMPL., HOW MANY* - - -	
23. INTERVALS DRILLED BY →		ROTARY TOOLS 0 - 3650		CABLE TOOLS - - -		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3476 - 3538 Pictured Cliffs (MD & TVD)	
25. WAS DIRECTIONAL SURVEY MADE No		26. TYPE ELECTRIC AND OTHER LOGS RUN Gamma Ray Correlation		27. WAS WELL CORED No		28. CASING RECORD (Report all strings set in well)	
CASING SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
7-5/8"		26.40		233		9-7/8"	
2-7/8"		6.50		3646		6-3/4"	
29. LINER RECORD		30. TUBING RECORD		31. PERFORATION RECORD (Interval, size and number)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*	
SCREEN (MD)		SIZE		DEPTH SET (MD)		PACKER SET (MD)	
NO TUBING		1 - 0.42" hole at each of the following depths: 3476, 85, 89, 93, 98, 3503, 12, 3518, 26, 35, 38. (Total of 11 holes)		DEPTH INTERVAL (MD)		AMOUNT AND KIND OF MATERIAL USED	
3476 - 3538		1000 gal. 7-1/2% HCL, 60,000 lb. 10-20 sand, & 54,000 gal. 70-30 foam		33.* PRODUCTION		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) Vented	
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing		WELL STATUS (Producing or shut-in) Shut-In		35. LIST OF ATTACHMENTS	
DATE OF TEST 1/6/81		HOURS TESTED 3		CHOKE SIZE 3/4"		PROD'N. FOR TEST PERIOD →	
OIL—BBL. ---		GAS—MCF. 71		WATER—BBL. ---		GAS-OIL RATIO	
FLOW. TUBING PRESS. ---		CASING PRESSURE 37		CALCULATED 24-HOUR RATE →		OIL GRAVITY-API (CORR.)	
OIL—BBL. ---		GAS—MCF. 566		WATER—BBL. ---		TEST WITNESSED BY James P. Collard	

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

Kenneth E. Roddy

TITLE

Production Superintendent

DATE

JAN 12 1981

*(See Instructions and Spaces for Additional Data on Reverse Side)

FARMINGTON DISTRICT
BY l

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BY

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types of electric and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any additional interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequate for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT IN PRESSURES, AND RECOVERIES			38.		GEOLOGIC MARKERS	
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.		NAME	MEAS. DEPTH
					Ojo Alamo (Base)	2685
					Fruitland	3185
					Pictured Cliffs	3456